

## AUTHORIZATION AND RELEASE

I, (Name) \_\_\_\_\_

born at (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Country) \_\_\_\_\_

(Date) \_\_\_\_\_, having filed an application for admission to the bar of Nebraska, hereby apply for

a character report and consent to have an investigation made as to my moral character, professional reputation and fitness for the practice of law and such other information as may be received, all of which will be reported only to the admitting authority. I agree to provide any further information which may be required concerning my past record. I understand that the contents of my character report are confidential, and may not be disclosed to me.

I also authorize and request every person, firm, company, corporation, governmental agency, law enforcement, court, association or institution having control of any documents, records and other information, to furnish to the Nebraska State Bar Commission any such information, including documents, records, bar association files regarding charges or complaints filed against me, including any complaints erased by law, whether formal or informal, pending or closed, or any other pertinent data, and to permit the Nebraska State Bar Commission or any of its agents or representatives to inspect and make copies of such documents, records and other information. The records, however, will not include any information in respect to a juvenile offense.

I authorize the National Personnel Records Center in St. Louis, MO, or other custodian of my military records to release to the Nebraska State Bar Commission information or photocopies from my military personnel and related medical records, or only the following information/records: \_\_\_\_\_.  
This would include a photocopy of my DD Form 214, Record of Separation.

I hereby release, discharge and exonerate the Nebraska State Bar Commission, its agents and representatives, the admitting authority of the above jurisdiction, its agents and representatives, and any persons so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information on the investigation made by the Nebraska State Bar Commission or by the admitting authority.

STATE OF \_\_\_\_\_ )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

SUBSCRIBED and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_

Notary Public \_\_\_\_\_

My Commission expires: \_\_\_\_\_ ( S E A L )

